#### FORM D

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## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

### FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

OMB Number:	3235-0076
Expires: Ap	ril 30, 2008
Estimated avera	ge burden
hours per respor	ise16.00

OMB APPROVAL

	SEC U	SE ONLY	
Prefix			Serial
	DATE	RECEIVED	

Name of Offering (  check if this is an ame	endment and name ha	is changed, and	indicate cha	inge.)				
Moody National Financial Fund I, LLC - Pr	ivate Placement of U	Inits of Member	ship Interes	t				
Filing Under (Check box(es) that apply:)	□ Rule 504 □	Rule 505	⊠ Rule 506	6 🗆 Sectio	n 4(6)	ULOE		
Type of Filing: ⊠ New Filing □ Amer	dment				, ,			
	A. BASIC ID	ENTIFICATIO	ON DATA					
1. Enter the information requested about the	issuer			•				
Name of Issuer (  check if this is an amend	ment and name has	changed, and inc	licate chang	ge.)				
Moody National Financial Fund I, LLC								
Address of Executive Offices	(Number and Stre	et, City, State, 2	Zip Code)	Telephone Nu	mber (Includ	ing Area Code)		
6363 Woodway Drive, Suite 110, Houston,	Texas 77057			713-977-7500				
Address of Principal Business Operations	(Number and Stre	et, Sity State	Zin Code)	Telep		Arra Code)		
(if different from Executive Offices)		FRUCE	うりたり	UNIVERSA				
	····	007 1 E	P			######################################		
•				<b>                                    </b>				
The Issuer was formed for the purpose of ac	quiring real estate re	PHOTERCOAL	DELITERO		08061857	**************************************		
Type of Business Organization		II IOIVIOOIY	KEDIEKO		,			
□ corporation	□limited partnershi	p, already forme	ed	🗵 other	(please spec	ify):		
☐ business trust	☐ limited partnersh	ip, to be formed		Limited	Liability Cor	mpany		
1		Month Y	<u>ear</u>					
	Actual or Estimated Date of Incorporation or Organization: 0 4 0 8 \alpha Actual \Box							
Julisdiction of Incorporation of Organization					DE			
□ corporation □ business trust	□ limited partnershi □ limited partnersh r Organization:	p, already formed ip, to be formed Month 9 0 4 0 U.S. Postal Serv	REUTERS ed  (ear   8	Limited  Actual ation for State:	Liability Cor	ify): mpany		

## **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### - ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

#### A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and managing partner of partnership issuers.
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☒ Manager
Full Name (Last name first, if individual)
Moody Financial Fund Manager I, LLC
Business or Residence Address (Number and Street, City, State, Zip Code)
6363 Woodway Drive, Suite 110, Houston, Texas 77057
Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer of the Manager
Full Name (Last name first, if individual)
Moody, Brett C.
Business or Residence Address (Number and Street, City, State, Zip Code)
6363 Woodway Drive, Suite 110, Houston, Texas 77057
Check Box(es) that Apply:   Promoter   Beneficial Owner   Executive Officer of the Manager
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Executive Officer of the Manager
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply:   Promoter  Beneficial Owner  Executive Officer  Executive Officer of the Manager
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply:   Promoter   Beneficial Owner   Executive Officer   Executive Officer of the Manager
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply:   Promoter   Beneficial Owner   Executive Officer   Director   General and/or   Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					B. II	VFORMA	TION A	OUT OF	FERING		•			
1.	Has the	issuer so	ld, or does			sell, to not							Yes □	No 区
2.	What is	s the mini	mum inves	stment that	will be ac	cepted fro	m any ind	ividual?			•••••		\$ <u>50,000</u>	
3.	Does th	ne offering	g permit jo	oint owners	ship of a si	ngle unit?	•••••	•••••	•••••		•••••		Yes □	No ⊠
4.	similar an asso or deal	remunera ciated per er. If mo	ntion for so rson or age ore than fi	olicitation ent of a bro	of purchas oker or de- rsons to b	ers in con aler registe	nection wi red with t	th sales of he SEC an	securities d/or with a	in the offer state or si	ering. If a	y, any com person to he name of you may se	be listed f the brok	is cer
Ful	l Name (	Last name	e first, if i	ndividual)			•							
Ple	ase see t	he attache	d chart.											
Bu	siness or	Residenc	e Address	(Number	and Street	, City, State	e, Zip Coo	le)						
Na	me of As	sociated I	Broker or	Dealer										
						nds to Soli								
	•		s" or checl		-		••••••			•••••		🗆 Al	l States	
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
			e first, if i											
'Bu	siness or	Residenc	e Address	(Number	and Street	City, State	e, Zip Cod	le)						
Na	me of As	sociated I	Broker or l	Dealer										
						nds to Soli								
	•				-								1 States	
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Ful	l Name (	Last name	e first, if in	ndividual)										
Bu	siness or	Residenc	e Address	(Number	and Street,	City, State	e, Zip Cod	le)						
Na	me of As	sociated I	Broker or I	Dealer		•	• •							
Sta	tes in W	hich Perso	on Listed F	las Solicit	ed or Inter	nds to Solid	cit Purchas	sers						
									************	•••••		🗆 Al	l States	
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	(FL) [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	and already exchanged.	Aggregate	Amount Already
	21.	Offering Price	Sold
	Debt\$		\$
	Equity\$		\$
	□ Common □ Preferred		
	Convertible Securities (including warrants)		
	Partnership Interests		\$
	Other (Specify: Units of Membership Interest)		
	Total\$	100,000,000	<b>5</b>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	•	\$
	Non-accredited Investors		
	Total (for filings under Rule 504 only)		\$
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
		Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505	·	2
	Regulation A		\$
	Rule 504		. \$
4.			
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	$\boxtimes$	\$ <u>115,000</u>
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	$\boxtimes$	\$ 6,000,000
	Other Expenses (identify) organizational and offering expenses		\$ 1,885,000

	C. OFFERING PRICE, NUMBE	K OF INVESTORS, EXPENSES AND USE C	F PROCEED	3
	b. Enter the difference between the aggregate off I and total expenses furnished in response to Par the "adjusted gross proceeds to the issuer."	\$92,000,00 <u>0</u>		
5.	Indicate below the amount of the adjusted gross p for each of the purposes shown. If the amount for and check the box to the left of the estimate, adjusted gross proceeds to the issuer set forth in re-	or any purpose is not known, furnish an estimate The total of the payments listed must equal the	•	
			Payments to Officers, Directors, &	Payments to
			Affiliates	Others
	Salaries and fees		\$	□ \$
	Purchase of real estate		\$	□ \$
	Purchase, rental or leasing and installation of	machinery and equipment	<b>\$</b>	<b></b>
	Construction or leasing of plant buildings and	\$	□ \$	
	Acquisition of other businesses (including the offering that may be used in exchange for the issuer pursuant to a merger		•	<b></b>
	•			
	• •			
	<b>9</b> .	ted assets.		
		Led assets.		
	Total Fayments Listed (Column totals added).		10 9 <u>72,0</u>	00,000
	1	D. FEDERAL SIGNATURE		
fol	e issuer has duly caused this notice to be signed by lowing signature constitutes an undertaking by the juest of its staff, the information furnished by the issuer.	e issuer to furnish to the U.S. Securities and Exuer to any non-accredited investor pursuant to pa	change Comm	ission, upon writter
Iss	uer (Print or Type)	Signature	Date	
М	oody National Financial Fund I, LLC		10/6	
Na	ime of Signer (Print or Type) ett C. Moody	Title of Signer (Print or Type) Sole Member of Sole Member of Manager	1 , 5	<u>/</u>
	Intentional misstatements or omissions	ATTENTION	See 18 II S C	1001)
	intentional misstatements of omissions	oi iaci constitute iederai criminai vioiations. (	Oce 10 U.S.C.	1001.)

	E. S	FATE SIGNATURE	
1.	Is any party described in 17 CFR 230.262 presently subjof such rule?		Yes No □ ⊠
	See Appendix, Co	olumn 5, for state response.	
2.	The undersigned issuer hereby undertakes to furnish to Form D (17 CFR 239.500) at such times as required by		this notice is filed a notice on
3.	The undersigned issuer hereby undertakes to furnish to issuer to offerees.	the state administrators, upon written request	t, information furnished by the
4.	The undersigned issuer represents that the issuer is fan limited Offering Exemption (ULOE) of the state in whi of this exemption has the burden of establishing that the	ch this notice is filed and understands that the	
	ne issuer has read this notification and knows the content dersigned duly authorized person.	s to be true and has duly caused this notice to	be signed on its behalf by the
Iss	suer (Print or Type) Sigr	nature	Date
Mo	oody National Financial Fund I, LLC		iolulos

Title of Signer (Print or Type)

Sole Member of Sole Member of Manager

#### Instruction:

Name of Signer (Print or Type)

Brett C. Moody

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

#### **APPENDIX** 4 1 2 Disqualification under State ULOE Type of security and aggregate offering price (if yes, attach Intend to sell Type of investor and explanation of to non-accredited waiver granted) offered in state amount purchased in State investors in State (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) \$100,000,000 Number of Number of Units of Non-Accredited Accredited Yes Yes No Membership Investors Amount Investors Amount No State AL ΑK AZ AR CA CO CT DE DC FL GA HI ID IL ΙN IA KS KY LA ME MD MA ΜI MN MS

# APPENDIX

1	2 3		4 5							
- 1	Intend	to sell	Type of security and aggregate offering price					Disqualification under State ULOE (if yes, attach explanation of		
		s in State	offered in state		Type of investor and amount purchased in State			waiver granted)		
	(Part B	-Item 1)	(Part C-Item 1)		(Part	C-Item 2)		(Part E-		
			\$100,000,000	Number of		Number of				
State	Yes	No	Units of Membership	Accredited Investors	Amount	Non-Accredited Investors	Amount	Yes	No	
МО	`		•							
МТ										
NE	,									
NV	,									
NH	,									
NJ	,							,		
NM	,									
NY										
NC										
ND										
ОН										
OK										
OR										
PA										
RI										
SC										
SD										
TN										
TX										
UT										
VT										
VA								·		
WA										
wv										
WI										

3	4	5
		Disqualification
Type of security		under State ULOE
and aggregate		(if yes, attach
offering price	Type of investor and	explanation of
		l i

	to non-a	to sell accredited is in State 3-Item 1)	and aggregate offering price offered in state (Part C-Item 1)		amount pur	investor and rchased in State C-Item 2)		(if yes, explana waiver g (Part E-	ation of granted)
State	Yes	No	\$100,000,000 Units of Membership	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									

APPENDIX

2

